\* = Required field for entire application



## Please print LEGIBLY, in INK

## Application can be filled out and submitted online http://www.ecy.wa.gov/programs/swfa/eyc/nwro.html

FIRST NAME:	M.I
LAST NAME:	* BIRTHDATE://
dates listed below. Please visit our website at http://www.ecy.wa	rest Regional Office will run summer crews in the locations and during the a.gov/programs/swfa/eyc/nwro.html for additional information. If you are e, check BOTH. If hired, crew members work ONLY one session.
Session 1: June 28 to July 22, 2016	Session 2: July 25 to August 17, 2016
□ Whatcom       □ North King/South Snohomish (includes Seattle north of I-90)         □ Skagit/North Snohomish       □ East King         □ Central Snohomish       □ South King (includes Seattle south of I-90)	☐ Whatcom++ ☐ North King/South Snohomish (includes Seattle north of I-90) ☐ Skagit/North ☐ East King ☐ Central Snohomish ☐ South King (includes Seattle south of I-90)
	+ + Session 2 Whatcom and Skagit crews end on August 18
EQUAL OPPORTUNITY INFORMATION In order to ensure equal employment opportunity, the Washington by completing the following information. Your answers will be tr	State Department of Ecology requests your voluntary cooperation eated as confidential.
GENDER: Male Female DISABLE	ED? NO YES
RACE / ETHNIC ORIGIN (check all that apply)	
☐ A – Native American ☐ M – Hispanic	☐ C – Asian/Pac Islander
☐ B – African American ☐ W – Caucasian	Other (explain)
APPLICANT CONTACT INFORMATION	
* HOME ADDRESS	
* CITY:*STA	ATE:*ZIP CODE:
* BEST PH # TO REACH YOU AT:()	HOME PHONE:(
☐ CHECK IF SAME AS HOME ADDRESS	
* MAILING ADDRESS (or PO Box):	
* CITY: STA	TE:ZIP CODE:
* Have you ever been convicted of a misdemeanor or felor	
* Where did you learn about this opportunity? ☐ School ☐	• — —
EMERGENCY CONTACT INFORMATION	-
	* LAST NAME:
	CELL PHONE: ( )
	er
	·
EDUCATION INFORMATION	
* SCHOOL NAME:	* CURRENT GRADE LEVEL:

EMPLOYER #1	NAME:			START D	ATE:	END	D DATE:
ADDRESS:			CITY: _		STA	TE:	ZIP:
PHONE: ()_	НО	URS PER WEEK:		NAME OF IMME	DIATE SUPI	ERVISOR	:
SPECIFIC DUTI	ES:						
				START D			
ADDRESS:			CITY: _		STA	TE:	ZIP:
PHONE: ( )	НО	URS PER WEEK:		NAME OF IMME	DIATE SUPI	ERVISOR	: <u> </u>
SPECIFIC DUTI	ES:						
Describe any organization	is and include the	nce gained thro e dates and natu	ugh voluntoure of the p	bility) eer work, commur roject or organizat	tion:		rice
Describe any organization	y skills or experie is and include the	nce gained thro	ugh volunto	eer work, commur roject or organiza	tion:		rice
Describe any organization	y skills or experie is and include the	nce gained thro	ugh volunto	eer work, commur roject or organiza	tion:		rice
Describe any organization	y skills or experience and include the stand include the stand include the standard standard standard skills or capa and skills or capa and skills or capa and skills or capa and standard stand	nce gained throe dates and natural bilities you have	ugh voluntoure of the pethat relate	eer work, community roject or organization of the tothis job. Why see to this job.	should we h	nire YOU	rice ?
Describe any organization  Describe spe	By checking this information proving rejection of my all	box, I certify that I ded is true and corplication or my tel	gh volunte ure of the p that relate filled out this mplete. I und rmination if e	eer work, community roject or organization of the tothis job. Why see to this job.	should we h	nire YOU  y knowled formation at least or	ge, the may result in the

Signature of APPLICANT (in INK)

WHERE TO MAIL (or hand deliver) this APPLICATION and at least one TEACHER REFERENCE: (NO FAXES)

Ecology Youth Corps Attn: Sarah J. Elledge 3190 160th Ave SE Bellevue WA 98008-5452

NOTE: Due to the large number of applications submitted, we are unable to interview everyone who applies. For more information, visit Ecology's website at:

http://www.ecy.wa.gov/programs/swfa/eyc/nwro.html